



Licensure Bureau
CERTIFICATE OF NEED PROGRAM MONTHLY REPORT
January 2008

NAME	LOCATION	PROPOSAL	CAPITAL EXPENSE*	LOI RECEIVED	MTH	CR	APP DUE	APP RCVD	HEARING REQ/ DATE	DPHHS DECISION DEADLINE	DPHHS DECISION & DATE	REC REQ
Glendive Medical Center	Glendive	Relocate 16 licensed beds of GMC Extended Care Nursing Home	\$1,973,188.00	6/28/07	7/07	No	11/12/07	11/16/07	No REQ	2/14/08	Y 1/30/08	
Boyd Andrew Community Services	Helena	Provide residential methamphetamine treatment to low income female adults	None reported	12/5/07	12/07	No	4/8/08	1/11/08		4/10/08		

LEGEND:

ASC Ambulatory Surgical Center
 CDU Chemical Dependency Unit
 CO County
 CR Comparative Review
 DEC Decision
 DISMISS Appeal dismissed
 FAC Facility
 HHA Home Health Agency

H Hospital
 HIS Indian Health Service
 LOI Letter of Intent
 LTC Long-Term Care
 MTH Month of Notice
 NH Nursing Home
 NR Non-Reviewable Project
 N/A Not Applicable

REC REQ-Reconsideration Hearing of Decision
 REQ Request
 SNF Skilled Nursing Facility
 TBA To Be Announced
 TBI Traumatic Brain Injury
 10/10 Ten Bed/Ten Percent Rule (50-5-301, MCA)
 N Disapproval Y Approval or Yes
 DATES Month/Day/Year

* First-year operating cost HHA
 Name of facility in **BOLD** indicates a new request for report month